



MAY 04 2007

Amendment/Reply Transmittal Letter  
 Application No. 10/518,641  
 Attorney's Docket No. 1032899-000018  
 Page 2

- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	0	20	0	x \$ 50 (1202)	\$ 0
Independent Claims	0	3	0	x \$ 200 (1201)	0
<input type="checkbox"/> If Amendment adds multiple dependent claims, add \$ 360 (1203)					\$ 0
Total Claim Amendment Fee					\$ 0
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					0
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0

- ☐ Charge \_\_\_\_\_ to Deposit Account No. 02-4800 for the fee due.
- ☐ A check in the amount of \_\_\_\_\_ is enclosed for the fee due.
- ☐ Charge \_\_\_\_\_ to credit card for the fee due. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL &amp; ROONEY PC

Date May 4, 2007

By: Wendi L. Weinstein  
 Wendi L. Weinstein  
 Registration No. 34456

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I hereby certify that this correspondence is being submitted by facsimile transmission to the commission for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, to the following facsimile number.	
Facsimile Number. 571-273-8300	<u>Wendi L. Weinstein</u> Typed Name: Wendi L. Weinstein
Date of Transmission: May 4, 2007	